

UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE

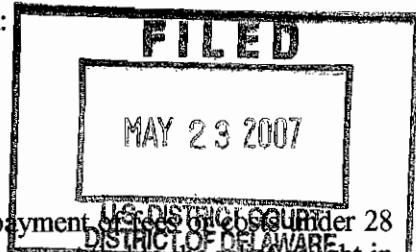
Steven W. Krafchick
Plaintiff,
v.

Thomas L. Corroll (Warden)
Defendant(s)

APPLICATION TO PROCEED
WITHOUT PREPAYMENT OF
FEES AND AFFIDAVIT

0 7 - 2 8 4

CASE NUMBER:



I, Steven W. Krafchick declare that I am the (check appropriate box)

Petitioner/Plaintiff/Movant Other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees and costs under 28 USC §1915, I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated? Yes No (If "No" go to Question 2)

If "YES" state the place of your incarceration Delaware Correctional Center, Dover, DE.

Inmate Identification Number (Required): 00178856

Are you employed at the institution? Yes Do you receive any payment from the institution? Yes

Attack a ledger sheet form the institution of your incarceration showing, at least the past six months' transactions

2. Are you currently employed? Yes No

a. If the answer is "YES" state the amount of your take-home salary or wages and pay period and give the name and address of your employer. Between \$60.00 & \$80.00 dollars a month Delaware Correction Center, 1181 Paddock Road, Smyrna, DE 19977.

b. If the answer is "NO" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer. N/A

3. In the past 12 twelve months have you received any money from any of the following sources?

a.	Business, profession or other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b.	Rent payments, interest or dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
c.	Pensions, annuities or life insurance payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
d.	Disability or workers compensation payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
e.	Gifts or inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
f.	Any other sources	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

If the answer to any of the above is "YES" describe each source of money and state the amount received AND what you expect you will continue to receive. Monthly gifts from family in the amount of \$40.00 a month.

4. Do you have any cash or checking or saving accounts? Yes No

If "Yes" state the total amount \$N/A

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or other valuable property? Yes No

If "Yes" describe the property and state its value.

N/A.

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support, *OR* state *NONE* if applicable.
None.

I declare under penalty of perjury that the above information is true and correct.

5/21/07
DATE



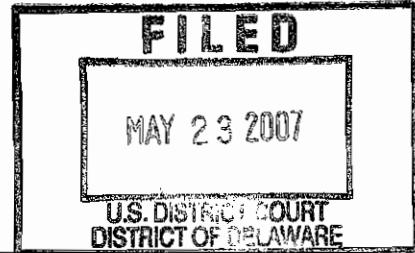
SIGNATURE OF APPLICANT

NOTE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.

DELAWARE CORRECTIONAL CENTER
SUPPORT SERVICES OFFICE
MEMORANDUM

07-284

TO: Steven Kraftkirk SBI#: 178854
 FROM: *Stacy Shane, Support Services Secretary*
 RE: 6 Months Account Statement
 DATE: May 2, 2007



Attached are copies of your inmate account statement for the months of November 1, 2006 to April 30, 2007.

The following indicates the average daily balances.

<u>MONTH</u>	<u>AVERAGE DAILY BALANCE</u>
<u>Nov</u>	<u>20,68</u>
<u>Dec</u>	<u>64.08</u>
<u>Jan</u>	<u>97.17</u>
<u>Feb</u>	<u>112.44</u>
<u>March</u>	<u>131.95</u>
<u>April</u>	<u>119.08</u>

Average daily balances/6 months: 91.03

Attachments

CC: File

Stacy Shane
5/2/07

Janette
Abbel
5/2/07

Date Printed: 5/2/2007

From January 2007 to April 2007

Page 1 of 2

SBI 00178856	Last Name Kraftchick	First Name Steven	MI Suffix	Beginning Month Balance: \$28.96	Ending Month Balance: \$85.84				
Trans Type	Date	Deposit or Withdrawal Amount	Medical Hold	Non-Medical Hold	Balance	Trans #	MO# / Ck#	Pay To	Source Name
Misc Wage	1/2/2007	\$74.34	\$0.00	\$0.00	\$103.30	366340			FS 1/1/24-1/2/23/2006
Canteen	1/3/2007	(\$26.46)	\$0.00	\$0.00	\$76.84	367870			N MYERS
Mail	1/5/2007	\$60.00	\$0.00	\$0.00	\$136.84	369281	4964887597		
Canteen	1/10/2007	(\$24.13)	\$0.00	\$0.00	\$112.71	370619			
Canteen	1/17/2007	(\$16.74)	\$0.00	\$0.00	\$95.97	374036			
Canteen	1/24/2007	(\$20.29)	\$0.00	\$0.00	\$75.68	376430			
Canteen	1/31/2007	(\$24.19)	\$0.00	\$0.00	\$51.49	380446			
Misc Wage	2/1/2007	\$70.74	\$0.00	\$0.00	\$122.23	381013			
Canteen	2/7/2007	(\$24.99)	\$0.00	\$0.00	\$97.24	383750			
Mail	2/8/2007	\$40.00	\$0.00	\$0.00	\$137.24	384511	49648885154		N MYERS
Canteen	2/13/2007	(\$21.62)	\$0.00	\$0.00	\$115.62	386676			
Canteen	2/21/2007	(\$21.39)	\$0.00	\$0.00	\$94.23	390561			
Canteen	2/27/2007	(\$23.63)	\$0.00	\$0.00	\$70.60	393442			
Supplies-MailIP	2/27/2007	\$0.00	\$0.00	\$0.00	\$70.60	393532			2/23/07
Supplies-MailIP	2/27/2007	\$0.00	\$0.00	\$0.00	\$70.60	393536			2/23/07
Misc Wage	3/1/2007	\$78.12	\$0.00	\$0.00	\$148.72	394713			FS 1/24-2/23/07
Canteen	3/7/2007	(\$18.56)	\$0.00	\$0.00	\$130.16	397424			
Mail	3/8/2007	\$40.00	\$0.00	\$0.00	\$170.16	398187	5656215705		N MYERS
Canteen	3/14/2007	(\$31.48)	\$0.00	\$0.00	\$138.68	400321			
Canteen	3/21/2007	(\$21.39)	\$0.00	\$0.00	\$117.29	402937			
Supplies-MailIP	3/22/2007	(\$6.15)	\$0.00	\$0.00	\$111.14	404525			2/23/07
Supplies-MailIP	3/22/2007	(\$5.00)	\$0.00	\$0.00	\$106.14	404526			2/23/07
Canteen	3/28/2007	(\$25.58)	\$0.00	\$0.00	\$80.56	406603			
Misc Wage	4/2/2007	\$69.48	\$0.00	\$0.00	\$150.04	408437			FS 2/24-3/23/07
Canteen	4/4/2007	(\$24.18)	\$0.00	\$0.00	\$125.86	409901			
Mail	4/10/2007	\$40.00	\$0.00	\$0.00	\$165.86	412603	5656215702		N MYERS
Canteen	4/11/2007	(\$26.28)	\$0.00	\$0.00	\$139.58	412946			
Canteen	4/19/2007	(\$28.93)	\$0.00	\$0.00	\$110.65	416844			
Canteen	4/24/2007	(\$24.81)	\$0.00	\$0.00	\$85.84	419614			

Date Printed: 5/2/2007

Page 2 of 2

Individual Statement
From January 2007 to April 2007

Ending Month Balance: \$85.84

Total Amount Currently on Medical Hold: \$0.00

Total Amount Currently on Non-Medical Hold: \$0.00